EMOTIONAL CPR IS RECOMMENDED FOR LACDMH By Daniel B. Fisher, M.D., Ph.D. and S. Michael Szczerbaty, M.A., M.H.S.C.

What is Emotional CPR (eCPR)? The approach is said to be holistic, hopeful and empowering. It is a heart-to-heart experience between provider and consumer. It is embedded in a hopeful belief that, by using interior experience, empathy, compassion and knowledge, anyone can help another person recover from an emotional crisis. Rather than labeling someone with another "mental health problem", the approach assumes that the person is coping with an experience beyond their current ability to effectively manage their emotional crises. The sooner an eCPR practitioner begins to support a person in their emotional crisis, the more likely it is that the person will make a full and timely return to a life that has meaning and purpose.

Emotional CPR was developed and authored by Dr. Daniel Fisher, M.D., Ph.D., a Psychiatrist and co-founding Executive Director of the 20-year-old recovery-based National Empowerment Center, to address the vast and compelling need to teach both lay people and mental health providers how to assist individuals through an emotional crisis. Dr. Fisher is also the former Commissioner on the White House New Freedom Commission on Mental Health. Quite simply, eCPR teaches people what to do if they encounter someone experiencing an emotional crisis. When they encounter the person in crises on a person-to-person level, their "role" is to be without roles, to be empathic with a fellow human being in distress, not authoritative, the so-called "power over" role. The eCPR practitioner offers a humanistic base from which to understand the subjective world of the person in crises.

This approach engenders an attitude of genuine caring, respect and acceptance. It provides the person in crises with the rare opportunity to be truly listened to without evaluation or judgment. Instead of perceiving a consumer in preconceived diagnostic categories, someone trained in eCPR meets them on a moment-to-moment experiential basis and helps them by entering their world. They strive to sense the consumers' subjective experience, particularly in the here and now. This is similar to Mindfulness training.

On Tuesday, January 21st and Thursday, January 23rd, 2014, the Los Angeles County Department of Mental Health's Office of Empowerment and Advocacy, will provide two-day <u>eCPR training</u> for 40 individuals; 20 of which will receive eCPR instruction in Spanish. It should be noted that Dr. Fisher is coming to Los Angeles from the National Empowerment Center in Massachusetts to lead/facilitate the English training for two days on January 21st and 22nd. Maria Ostheimer will also be co-presenting at the English version training with Dr. Fisher. Maria, who works with Dr. Fisher, lives in Orange County. She was one of the keynote speakers at the recent Esperanza Hope and Recovery Conference and presented eCPR there in Spanish. She will be the Emotional CPR trainer/facilitator at this Empowerment and Advocacy training in Spanish on January 23rd and January 24th. This training will be available for both consumers and staff with lived experience. Those who complete this training will receive eCPR certification. For more information, please contact Catherine Bond at (213) 739-7372.

After this initial training, a Train-the-Trainer model training would be an ideal, cost-saving measure to train additional peers, staff and families.

Emotional crisis is a "universal experience" — it can happen to any one of our consumers, at any time. "When a consumer is exposed to extraordinary circumstances, he or she develops creative ways to protect themselves from real and/or perceived harm." Through the use of eCPR, a consumer can better understand their unusual behavior that was brought on by an emotional crisis. Supporting people in resuming meaningful roles, relationships and routines within the community is the goal of eCPR.

Some consumers respond to severe emotional distress by retreating into monologue: an isolated and disconnected emotional state. In monologue, a person's rational ability to think clearly gets interrupted and their sense of self is submerged and no longer available for engaging in a dialogue with anyone else. eCPR teaches support skills for the consumer to stay centered and provide a safe space for the consumer in crisis to express his or her strong emotions; all the while both persons are able to experience their own vulnerability. In this way, eCPR practitioners assist a person to go from monologue into dialogue with others. This "emotional dialogue" allows the participant to understand the deeper meaning behind the feelings. From this shared understanding, helpful insights occur that allow a consumer to move beyond crisis, and to develop a more hopeful approach to life.

The re-establishment of dialogue is accomplished through the three phases or components of eCPR: C = Connecting, P = emPowering and R = Revitalizing.

- 1. Connecting: Begins with the person being fully present for the person in distress, listening and focused with their full attention on an emotional level which creates an emotionally safe relationship, cultivates hope for the client, validates the person, and communicates a sense of compassionate caring by the person assisting.
- 2. emPowering: Feeling that connection, the person in distress begins to experience their power and their ability to formulate goals to plan their next steps. This occurs when the assisting provider enters into a collaborative "power with" as opposed to the "power over" relationship, which enables the connecting and empowering to be reciprocal. This sharing is a means to Connect and emPower the person in distress.
- 3. Revitalizing: Experiencing connection, power and the ability to plan next steps, the person in distress's vital center becomes engaged, clearer and stronger. They are ready to re-establish or resume social roles, responsibilities and relationships. The approach is inclusive, sensitive and culturally attuned versus being structured and ethno-centric.

eCPR instructs providers about what to do if they encounter a consumer in emotional crisis. "It de-mystifies the process of supporting someone and it also teaches skills that enhance communication and better understanding in all relationships."³

Peers, people with lived experience (LACDMH staff included), can learn and be certified in eCPR and can help persons recover from emotional distress and trauma, thus

preventing the unnecessary use of costly hospital emergency rooms. We encourage family members to take advantage of future eCPR trainings.

When persons in distress feel that they have a meaningful and valued place in the community, they are less likely to "act out" and hurt themselves or others. Thus, eCPR helps build stronger and more resilient communities.⁴

- "The International Association of Chiefs of Police has recommended including eCPR in law enforcement training." According to a recent report, "Law enforcement personnel who learn eCPR will be better equipped to efficiently and effectively resolve a crisis call involving people in emotional distress, thereby reducing potential escalation, harm or injury."⁵
- <u>CARF International</u> recommends eCPR as "a holistic, empowering approach to assisting persons served to cope with emotional crisis." In their 2013 Behavioral Healthcare standards manual, it is included as an example under the training requirement for direct service providers. CARF is the largest behavioral healthcare accrediting organization in the world.⁶
- Texas is now contemplating how to implement Emotional CPR throughout all of its mental health facilities.
- California's own Alameda County has been using eCPR for more than two years.

Emotional CPR (eCPR) could well improve outcomes for consumers in crises who live within Los Angeles County. Instead of committing the individual to a hospital (5150 of the Civil Code), and almost always placed in seclusion (viewed by most consumers in crises as punishment), the individual in crisis could be assisted at their place of residence by an eCPR outreach team. Just like physical CPR (Cardio-Pulmonary Resuscitation) can save the lives of people experiencing cardiac arrest, eCPR can also save the lives of people in emotional crisis. eCPR not only helps in preventing costly and unnecessary hospitalization, it can also provide hope and needed resources for a consumer's integration back into community life.

After certifying a sufficient number of practitioners in eCPR, the department could form an eCPR outreach crises team to connect with people and the community who are reported by family and/or police to be in an emotional crisis. Given the interest in eCPR around the country and abroad (Singapore is currently implementing eCPR throughout all of its mental health facilities. Texas is looking to do a similar undertaking.) It is for these reasons that we recommend the implementation of Emotional CPR for the Los Angeles County Department of Mental Health.

For more information on eCPR, please go to: http://ncmhr.org/emotional-cpr.htm and http://www.emotional-cpr.org/. "A Double Dose of CPR for DMH" that was published by PIO eNews in 2011 can be found at: http://www.peersnet.org/blog/michael-szczerbaty.

- 1. Taken from the eCPR trauma informed workshop at the 2014 Alternatives Conference. (Notes of Michael Szczerbaty)
- 2. Taken from the eCPR workshop at the 2011 Alternatives Conference. (Notes of Michael Szczerbaty).

- 3. Lauren Spiro, Director, National Coalition of Mental Health Consumer/Survivor Organizations.
- 4. Notes, 2014 Alternatives Conference.
- 5. Dr. Daniel Fisher speaking at the 2011 and 2014 Alternatives Conference workshops.
- 6. Dr. Fisher, 2014 Alternatives Conference workshop.